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|---|---------------|---|--------------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2008</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>                                     |               | Docket Number (Optional)<br>09852/0203745-USO |                    |
| Application Number      10/560,171-Conf. #1361  |               | Filed      December 9, 2005                   |                    |
| For      CEMENTED CARBIDE MATERIAL FOR SURFACE COATED GEAR CUTTING TOOL AND SURFACE COATED GEAR CUTTING TOOL  |               |   |                    |
| Art Unit      4116  |               | Examiner      J. A. Hevey                     |                    |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  |               |   |                    |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):   |               |   |                    |
|   | <u>Fee</u>    | <u>Small Entity Fee</u>                       |                    |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))   | \$120         | \$60  | \$ _____           |
| <input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$460         | \$230   | \$ _____           |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | <b>\$1050</b> | \$525   | <b>\$ 1,050.00</b> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$1640        | \$820   | \$ _____           |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$2230        | \$1115  | \$ _____           |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.   |               |   |                    |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |               |   |                    |
| <input checked="" type="checkbox"/> Payment by credit card.   |               |   |                    |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.  |               |   |                    |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-0100</u> .                 |               |   |                    |
| <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>               |               |   |                    |
| I am the <input type="checkbox"/> applicant/inventor.   |               |   |                    |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).   |               |   |                    |
| <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>47,522</u>  |               |   |                    |
| <input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration Number <u>                    </u> Acting under 37 CFR 1.34 <u>                    </u>                                 |               |   |                    |
| <br>_____<br>Signature  |               | April 10, 2008<br>_____<br>Date               |                    |
| Louis J. DeJuidice<br>_____<br>Typed or printed name  |               | (212) 527-7700<br>_____<br>Telephone Number   |                    |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. |               |   |                    |
| <input type="checkbox"/> Total of _____ forms are submitted.  |               |   |                    |